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| <b>TRANSMITTAL FORM</b><br>(to be used for all correspondence after initial filing) | Application Number   | 09/724,961             |                 |
|   | Filing Date          | November 28, 2000      |                 |
|   | First Named Inventor | Schenk, Dale B.        |                 |
|   | Art Unit             | 1647                   |                 |
|   | Examiner Name        | Sharon Turner          |                 |
| Total Number of Pages in This Submission  | 23                   | Attorney Docket Number | 15270J-004752US |

| ENCLOSURES (Check all that apply)   |  |   |
|---|--|---|
| <input checked="" type="checkbox"/> Fee Transmittal Form (PTO/SB/17) (1 page, in duplicate)<br><input type="checkbox"/> Fee Attached<br><input checked="" type="checkbox"/> Amendment / Reply (4 pages)<br><input type="checkbox"/> After Final<br><input type="checkbox"/> Affidavits/declaration(s)<br><input checked="" type="checkbox"/> Extension of Time Request (PTO/SB/22) (1 page)<br><input type="checkbox"/> Express Abandonment Request<br><input checked="" type="checkbox"/> Supplemental Information Disclosure Statement (2 pages) w/attached PTO/SB/08A (2 pages) and PTO/SB/08B (11 pages) (refs. 220-339 not included)<br><input type="checkbox"/> Certified Copy of Priority Document(s)<br><input type="checkbox"/> Response to Missing Parts/Incomplete Application<br><input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53 | <input type="checkbox"/> Drawing(s)<br><input type="checkbox"/> Licensing-related Papers<br><input type="checkbox"/> Petition<br><input type="checkbox"/> Petition to Convert to a Provisional Application<br><input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address<br><input type="checkbox"/> Terminal Disclaimer<br><input type="checkbox"/> Request for Refund<br><input type="checkbox"/> CD, Number of CD(s) | <input type="checkbox"/> After Allowance Communication to Group<br><input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences<br><input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)<br><input type="checkbox"/> Proprietary Information<br><input type="checkbox"/> Status Letter<br><input type="checkbox"/> Other Enclosure(s) (please identify below) |
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| Firm or Individual                         | Townsend and Townsend and Crew LLP<br>Rosemarie L. Celli<br>Reg. No. 42,397 |
| Signature                                  | <i>Rosemarie L. Celli</i>   |
| Date                                       | February 18, 2003   |

| CERTIFICATE OF MAILING   |                           |
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| Typed or printed name  | Rosemarie L. Celli        |
| Signature  | <i>Rosemarie L. Celli</i> |
| Date   | February 18, 2003         |

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|---|--------------------------|-------------------|
| <h2 style="text-align: center;">FEE TRANSMITTAL<br/>for FY 2003</h2> <p style="text-align: center;"><i>Patent fees are subject to annual revision.</i></p> <p><input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27</p> <p><b>TOTAL AMOUNT OF PAYMENT (\$)</b> 110</p> | <i>Complete if Known</i> |                   |
|   | Application Number       | 08/724,861        |
|   | Filing Date              | November 28, 2000 |
|   | First Named Inventor     | Schenk, Dale B.   |
|   | Examiner Name            | Sharon Turner     |
|   | Group Art Unit           | 1847              |
| Attorney Docket No.   | 152701-004752            |                   |

| <b>METHOD OF PAYMENT (check all that apply)</b><br><input type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> Other <input type="checkbox"/> None<br><input checked="" type="checkbox"/> Deposit Account:<br>Deposit Account Number: 20-1430<br>Deposit Account Name: Townsend and Townsend and Crow LLP   |              | <b>FEE CALCULATION (continued)</b><br><b>3. ADDITIONAL FEES</b> |              |  |          |                    |          |      |      |                    |     |                    |  |   |      |              |              |                   |          |                 |          |      |      |                  |   |                        |      |      |      |                    |    |                                   |      |      |      |                        |     |                                       |  |      |      |    |    |   |  |              |              |          |          |   |          |                     |      |     |    |                                     |  |      |      |    |    |  |  |      |      |     |    |                           |  |      |      |       |       |  |  |      |      |      |     |  |  |      |      |        |     |   |  |      |      |     |    |  |     |      |      |     |     |   |  |      |      |     |     |  |  |      |      |       |     |   |  |      |      |       |     |  |  |      |      |     |     |                  |  |      |      |     |     |  |  |      |      |     |     |                          |  |      |      |       |     |   |  |      |      |     |    |                                     |  |      |      |       |     |                                    |  |      |      |       |     |                                |  |      |      |     |     |                  |  |      |      |     |     |                 |  |      |      |     |    |                               |  |      |      |    |    |   |  |      |      |     |    |   |  |      |       |    |    |  |  |      |      |     |     |   |  |      |      |     |     |  |  |      |      |     |     |   |  |      |      |     |     |   |  |                     |  |  |  |  |  |                                   |  |  |  |                     |         |
|---|--------------|---|--------------|--|----------|--------------------|----------|------|------|--------------------|-----|--------------------|--|---|------|--------------|--------------|-------------------|----------|-----------------|----------|------|------|------------------|---|------------------------|------|------|------|--------------------|----|-----------------------------------|------|------|------|------------------------|-----|---------------------------------------|--|------|------|----|----|---|--|--------------|--------------|----------|----------|---|----------|---------------------|------|-----|----|-------------------------------------|--|------|------|----|----|--|--|------|------|-----|----|---------------------------|--|------|------|-------|-------|--|--|------|------|------|-----|--|--|------|------|--------|-----|---|--|------|------|-----|----|--|-----|------|------|-----|-----|---|--|------|------|-----|-----|--|--|------|------|-------|-----|---|--|------|------|-------|-----|--|--|------|------|-----|-----|------------------|--|------|------|-----|-----|--|--|------|------|-----|-----|--------------------------|--|------|------|-------|-----|---|--|------|------|-----|----|-------------------------------------|--|------|------|-------|-----|------------------------------------|--|------|------|-------|-----|--------------------------------|--|------|------|-----|-----|------------------|--|------|------|-----|-----|-----------------|--|------|------|-----|----|-------------------------------|--|------|------|----|----|---|--|------|------|-----|----|---|--|------|-------|----|----|--|--|------|------|-----|-----|---|--|------|------|-----|-----|--|--|------|------|-----|-----|---|--|------|------|-----|-----|---|--|---------------------|--|--|--|--|--|-----------------------------------|--|--|--|---------------------|---------|
| <b>1. BASIC FILING FEE</b><br><table border="1"> <thead> <tr> <th>Large Entity</th> <th>Small Entity</th> <th>Fee Code</th> <th>Fee (\$)</th> <th>Fee Description</th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr> <td>1001</td> <td>2001</td> <td>750</td> <td>375</td> <td>Utility filing fee</td> <td></td> </tr> <tr> <td>1002</td> <td>2002</td> <td>330</td> <td>165</td> <td>Design filing fee</td> <td></td> </tr> <tr> <td>1003</td> <td>2003</td> <td>520</td> <td>260</td> <td>Plant filing fee</td> <td></td> </tr> <tr> <td>1004</td> <td>2004</td> <td>750</td> <td>375</td> <td>Reissue filing fee</td> <td></td> </tr> <tr> <td>1005</td> <td>2005</td> <td>160</td> <td>80</td> <td>Provisional filing fee</td> <td></td> </tr> <tr> <td colspan="4" style="text-align: right;"><b>SUBTOTAL (1)</b></td> <td></td> <td></td> </tr> </tbody> </table> |              | Large Entity  | Small Entity | Fee Code   | Fee (\$) | Fee Description    | Fee Paid | 1001 | 2001 | 750                | 375 | Utility filing fee |  | 1002  | 2002 | 330          | 165          | Design filing fee |          | 1003            | 2003     | 520  | 260  | Plant filing fee |   | 1004                   | 2004 | 750  | 375  | Reissue filing fee |    | 1005                              | 2005 | 160  | 80   | Provisional filing fee |     | <b>SUBTOTAL (1)</b>                   |  |      |      |    |    | <table border="1"> <thead> <tr> <th>Large Entity</th> <th>Small Entity</th> <th>Fee Code</th> <th>Fee (\$)</th> <th>Fee Description</th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr> <td>1061</td> <td>2061</td> <td>130</td> <td>65</td> <td>Surcharge - late filing fee or oath</td> <td></td> </tr> <tr> <td>1092</td> <td>2092</td> <td>50</td> <td>25</td> <td>Surcharge - late provisional filing fee or cover sheet</td> <td></td> </tr> <tr> <td>1093</td> <td>2093</td> <td>130</td> <td>65</td> <td>Non-English specification</td> <td></td> </tr> <tr> <td>1812</td> <td>2812</td> <td>2,520</td> <td>1,260</td> <td>For filing a request for reexamination</td> <td></td> </tr> <tr> <td>1804</td> <td>2804</td> <td>920*</td> <td>460</td> <td>Requesting publication of SIR prior to Examiner action</td> <td></td> </tr> <tr> <td>1805</td> <td>2805</td> <td>1,840*</td> <td>920</td> <td>Requesting publication of SIR after Examiner action</td> <td></td> </tr> <tr> <td>1261</td> <td>2261</td> <td>110</td> <td>55</td> <td>Extension for reply within first month</td> <td>110</td> </tr> <tr> <td>1252</td> <td>2252</td> <td>410</td> <td>205</td> <td>Extension for reply within second month</td> <td></td> </tr> <tr> <td>1253</td> <td>2253</td> <td>830</td> <td>415</td> <td>Extension for reply within third month</td> <td></td> </tr> <tr> <td>1254</td> <td>2254</td> <td>1,450</td> <td>725</td> <td>Extension for reply within fourth month</td> <td></td> </tr> <tr> <td>1255</td> <td>2255</td> <td>1,870</td> <td>935</td> <td>Extension for reply within fifth month</td> <td></td> </tr> <tr> <td>1401</td> <td>2401</td> <td>320</td> <td>160</td> <td>Notice of Appeal</td> <td></td> </tr> <tr> <td>1402</td> <td>2402</td> <td>320</td> <td>160</td> <td>Filing a brief in support of an appeal</td> <td></td> </tr> <tr> <td>1403</td> <td>2403</td> <td>280</td> <td>140</td> <td>Request for oral hearing</td> <td></td> </tr> <tr> <td>1451</td> <td>2451</td> <td>1,510</td> <td>755</td> <td>Petition to institute a public use proceeding</td> <td></td> </tr> <tr> <td>1452</td> <td>2452</td> <td>110</td> <td>55</td> <td>Petition to revive - unavailability</td> <td></td> </tr> <tr> <td>1453</td> <td>2453</td> <td>1,300</td> <td>650</td> <td>Petition to revive - unintentional</td> <td></td> </tr> <tr> <td>1501</td> <td>2501</td> <td>1,300</td> <td>650</td> <td>Utility issue fee (or reissue)</td> <td></td> </tr> <tr> <td>1502</td> <td>2502</td> <td>470</td> <td>235</td> <td>Design issue fee</td> <td></td> </tr> <tr> <td>1503</td> <td>2503</td> <td>630</td> <td>315</td> <td>Plant issue fee</td> <td></td> </tr> <tr> <td>1480</td> <td>2480</td> <td>130</td> <td>65</td> <td>Petitions to the Commissioner</td> <td></td> </tr> <tr> <td>1807</td> <td>2807</td> <td>50</td> <td>25</td> <td>Petitions related to provisional applications</td> <td></td> </tr> <tr> <td>1808</td> <td>2808</td> <td>180</td> <td>90</td> <td>Submission of Information Disclosure Stmt</td> <td></td> </tr> <tr> <td>8021</td> <td>28021</td> <td>40</td> <td>20</td> <td>Recording each patent assignment per property (times number of properties)</td> <td></td> </tr> <tr> <td>1809</td> <td>2809</td> <td>750</td> <td>375</td> <td>Filing a submission after final rejection (37 CFR § 1.129(a))</td> <td></td> </tr> <tr> <td>1810</td> <td>2810</td> <td>750</td> <td>375</td> <td>For each additional invention to be examined (37 CFR § 1.129(b))</td> <td></td> </tr> <tr> <td>1801</td> <td>2801</td> <td>750</td> <td>375</td> <td>Request for Continued Examination (RCE)</td> <td></td> </tr> <tr> <td>1802</td> <td>2802</td> <td>900</td> <td>450</td> <td>Request for expedited examination of a design application</td> <td></td> </tr> <tr> <td colspan="4">Other fee (specify)</td> <td></td> <td></td> </tr> <tr> <td colspan="4">*Reduced by Basic Filing Fee Paid</td> <td><b>SUBTOTAL (3)</b></td> <td>(\$110)</td> </tr> </tbody> </table> |  | Large Entity | Small Entity | Fee Code | Fee (\$) | Fee Description   | Fee Paid | 1061                | 2061 | 130 | 65 | Surcharge - late filing fee or oath |  | 1092 | 2092 | 50 | 25 | Surcharge - late provisional filing fee or cover sheet |  | 1093 | 2093 | 130 | 65 | Non-English specification |  | 1812 | 2812 | 2,520 | 1,260 | For filing a request for reexamination |  | 1804 | 2804 | 920* | 460 | Requesting publication of SIR prior to Examiner action |  | 1805 | 2805 | 1,840* | 920 | Requesting publication of SIR after Examiner action |  | 1261 | 2261 | 110 | 55 | Extension for reply within first month | 110 | 1252 | 2252 | 410 | 205 | Extension for reply within second month |  | 1253 | 2253 | 830 | 415 | Extension for reply within third month |  | 1254 | 2254 | 1,450 | 725 | Extension for reply within fourth month |  | 1255 | 2255 | 1,870 | 935 | Extension for reply within fifth month |  | 1401 | 2401 | 320 | 160 | Notice of Appeal |  | 1402 | 2402 | 320 | 160 | Filing a brief in support of an appeal |  | 1403 | 2403 | 280 | 140 | Request for oral hearing |  | 1451 | 2451 | 1,510 | 755 | Petition to institute a public use proceeding |  | 1452 | 2452 | 110 | 55 | Petition to revive - unavailability |  | 1453 | 2453 | 1,300 | 650 | Petition to revive - unintentional |  | 1501 | 2501 | 1,300 | 650 | Utility issue fee (or reissue) |  | 1502 | 2502 | 470 | 235 | Design issue fee |  | 1503 | 2503 | 630 | 315 | Plant issue fee |  | 1480 | 2480 | 130 | 65 | Petitions to the Commissioner |  | 1807 | 2807 | 50 | 25 | Petitions related to provisional applications |  | 1808 | 2808 | 180 | 90 | Submission of Information Disclosure Stmt |  | 8021 | 28021 | 40 | 20 | Recording each patent assignment per property (times number of properties) |  | 1809 | 2809 | 750 | 375 | Filing a submission after final rejection (37 CFR § 1.129(a)) |  | 1810 | 2810 | 750 | 375 | For each additional invention to be examined (37 CFR § 1.129(b)) |  | 1801 | 2801 | 750 | 375 | Request for Continued Examination (RCE) |  | 1802 | 2802 | 900 | 450 | Request for expedited examination of a design application |  | Other fee (specify) |  |  |  |  |  | *Reduced by Basic Filing Fee Paid |  |  |  | <b>SUBTOTAL (3)</b> | (\$110) |
| Large Entity  | Small Entity | Fee Code  | Fee (\$)     | Fee Description  | Fee Paid |                    |          |      |      |                    |     |                    |  |   |      |              |              |                   |          |                 |          |      |      |                  |   |                        |      |      |      |                    |    |                                   |      |      |      |                        |     |                                       |  |      |      |    |    |   |  |              |              |          |          |   |          |                     |      |     |    |                                     |  |      |      |    |    |  |  |      |      |     |    |                           |  |      |      |       |       |  |  |      |      |      |     |  |  |      |      |        |     |   |  |      |      |     |    |  |     |      |      |     |     |   |  |      |      |     |     |  |  |      |      |       |     |   |  |      |      |       |     |  |  |      |      |     |     |                  |  |      |      |     |     |  |  |      |      |     |     |                          |  |      |      |       |     |   |  |      |      |     |    |                                     |  |      |      |       |     |                                    |  |      |      |       |     |                                |  |      |      |     |     |                  |  |      |      |     |     |                 |  |      |      |     |    |                               |  |      |      |    |    |   |  |      |      |     |    |   |  |      |       |    |    |  |  |      |      |     |     |   |  |      |      |     |     |  |  |      |      |     |     |   |  |      |      |     |     |   |  |                     |  |  |  |  |  |                                   |  |  |  |                     |         |
| 1001  | 2001         | 750   | 375          | Utility filing fee   |          |                    |          |      |      |                    |     |                    |  |   |      |              |              |                   |          |                 |          |      |      |                  |   |                        |      |      |      |                    |    |                                   |      |      |      |                        |     |                                       |  |      |      |    |    |   |  |              |              |          |          |   |          |                     |      |     |    |                                     |  |      |      |    |    |  |  |      |      |     |    |                           |  |      |      |       |       |  |  |      |      |      |     |  |  |      |      |        |     |   |  |      |      |     |    |  |     |      |      |     |     |   |  |      |      |     |     |  |  |      |      |       |     |   |  |      |      |       |     |  |  |      |      |     |     |                  |  |      |      |     |     |  |  |      |      |     |     |                          |  |      |      |       |     |   |  |      |      |     |    |                                     |  |      |      |       |     |                                    |  |      |      |       |     |                                |  |      |      |     |     |                  |  |      |      |     |     |                 |  |      |      |     |    |                               |  |      |      |    |    |   |  |      |      |     |    |   |  |      |       |    |    |  |  |      |      |     |     |   |  |      |      |     |     |  |  |      |      |     |     |   |  |      |      |     |     |   |  |                     |  |  |  |  |  |                                   |  |  |  |                     |         |
| 1002  | 2002         | 330   | 165          | Design filing fee  |          |                    |          |      |      |                    |     |                    |  |   |      |              |              |                   |          |                 |          |      |      |                  |   |                        |      |      |      |                    |    |                                   |      |      |      |                        |     |                                       |  |      |      |    |    |   |  |              |              |          |          |   |          |                     |      |     |    |                                     |  |      |      |    |    |  |  |      |      |     |    |                           |  |      |      |       |       |  |  |      |      |      |     |  |  |      |      |        |     |   |  |      |      |     |    |  |     |      |      |     |     |   |  |      |      |     |     |  |  |      |      |       |     |   |  |      |      |       |     |  |  |      |      |     |     |                  |  |      |      |     |     |  |  |      |      |     |     |                          |  |      |      |       |     |   |  |      |      |     |    |                                     |  |      |      |       |     |                                    |  |      |      |       |     |                                |  |      |      |     |     |                  |  |      |      |     |     |                 |  |      |      |     |    |                               |  |      |      |    |    |   |  |      |      |     |    |   |  |      |       |    |    |  |  |      |      |     |     |   |  |      |      |     |     |  |  |      |      |     |     |   |  |      |      |     |     |   |  |                     |  |  |  |  |  |                                   |  |  |  |                     |         |
| 1003  | 2003         | 520   | 260          | Plant filing fee   |          |                    |          |      |      |                    |     |                    |  |   |      |              |              |                   |          |                 |          |      |      |                  |   |                        |      |      |      |                    |    |                                   |      |      |      |                        |     |                                       |  |      |      |    |    |   |  |              |              |          |          |   |          |                     |      |     |    |                                     |  |      |      |    |    |  |  |      |      |     |    |                           |  |      |      |       |       |  |  |      |      |      |     |  |  |      |      |        |     |   |  |      |      |     |    |  |     |      |      |     |     |   |  |      |      |     |     |  |  |      |      |       |     |   |  |      |      |       |     |  |  |      |      |     |     |                  |  |      |      |     |     |  |  |      |      |     |     |                          |  |      |      |       |     |   |  |      |      |     |    |                                     |  |      |      |       |     |                                    |  |      |      |       |     |                                |  |      |      |     |     |                  |  |      |      |     |     |                 |  |      |      |     |    |                               |  |      |      |    |    |   |  |      |      |     |    |   |  |      |       |    |    |  |  |      |      |     |     |   |  |      |      |     |     |  |  |      |      |     |     |   |  |      |      |     |     |   |  |                     |  |  |  |  |  |                                   |  |  |  |                     |         |
| 1004  | 2004         | 750   | 375          | Reissue filing fee   |          |                    |          |      |      |                    |     |                    |  |   |      |              |              |                   |          |                 |          |      |      |                  |   |                        |      |      |      |                    |    |                                   |      |      |      |                        |     |                                       |  |      |      |    |    |   |  |              |              |          |          |   |          |                     |      |     |    |                                     |  |      |      |    |    |  |  |      |      |     |    |                           |  |      |      |       |       |  |  |      |      |      |     |  |  |      |      |        |     |   |  |      |      |     |    |  |     |      |      |     |     |   |  |      |      |     |     |  |  |      |      |       |     |   |  |      |      |       |     |  |  |      |      |     |     |                  |  |      |      |     |     |  |  |      |      |     |     |                          |  |      |      |       |     |   |  |      |      |     |    |                                     |  |      |      |       |     |                                    |  |      |      |       |     |                                |  |      |      |     |     |                  |  |      |      |     |     |                 |  |      |      |     |    |                               |  |      |      |    |    |   |  |      |      |     |    |   |  |      |       |    |    |  |  |      |      |     |     |   |  |      |      |     |     |  |  |      |      |     |     |   |  |      |      |     |     |   |  |                     |  |  |  |  |  |                                   |  |  |  |                     |         |
| 1005  | 2005         | 160   | 80           | Provisional filing fee   |          |                    |          |      |      |                    |     |                    |  |   |      |              |              |                   |          |                 |          |      |      |                  |   |                        |      |      |      |                    |    |                                   |      |      |      |                        |     |                                       |  |      |      |    |    |   |  |              |              |          |          |   |          |                     |      |     |    |                                     |  |      |      |    |    |  |  |      |      |     |    |                           |  |      |      |       |       |  |  |      |      |      |     |  |  |      |      |        |     |   |  |      |      |     |    |  |     |      |      |     |     |   |  |      |      |     |     |  |  |      |      |       |     |   |  |      |      |       |     |  |  |      |      |     |     |                  |  |      |      |     |     |  |  |      |      |     |     |                          |  |      |      |       |     |   |  |      |      |     |    |                                     |  |      |      |       |     |                                    |  |      |      |       |     |                                |  |      |      |     |     |                  |  |      |      |     |     |                 |  |      |      |     |    |                               |  |      |      |    |    |   |  |      |      |     |    |   |  |      |       |    |    |  |  |      |      |     |     |   |  |      |      |     |     |  |  |      |      |     |     |   |  |      |      |     |     |   |  |                     |  |  |  |  |  |                                   |  |  |  |                     |         |
| <b>SUBTOTAL (1)</b>   |              |   |              |  |          |                    |          |      |      |                    |     |                    |  |   |      |              |              |                   |          |                 |          |      |      |                  |   |                        |      |      |      |                    |    |                                   |      |      |      |                        |     |                                       |  |      |      |    |    |   |  |              |              |          |          |   |          |                     |      |     |    |                                     |  |      |      |    |    |  |  |      |      |     |    |                           |  |      |      |       |       |  |  |      |      |      |     |  |  |      |      |        |     |   |  |      |      |     |    |  |     |      |      |     |     |   |  |      |      |     |     |  |  |      |      |       |     |   |  |      |      |       |     |  |  |      |      |     |     |                  |  |      |      |     |     |  |  |      |      |     |     |                          |  |      |      |       |     |   |  |      |      |     |    |                                     |  |      |      |       |     |                                    |  |      |      |       |     |                                |  |      |      |     |     |                  |  |      |      |     |     |                 |  |      |      |     |    |                               |  |      |      |    |    |   |  |      |      |     |    |   |  |      |       |    |    |  |  |      |      |     |     |   |  |      |      |     |     |  |  |      |      |     |     |   |  |      |      |     |     |   |  |                     |  |  |  |  |  |                                   |  |  |  |                     |         |
| Large Entity  | Small Entity | Fee Code  | Fee (\$)     | Fee Description  | Fee Paid |                    |          |      |      |                    |     |                    |  |   |      |              |              |                   |          |                 |          |      |      |                  |   |                        |      |      |      |                    |    |                                   |      |      |      |                        |     |                                       |  |      |      |    |    |   |  |              |              |          |          |   |          |                     |      |     |    |                                     |  |      |      |    |    |  |  |      |      |     |    |                           |  |      |      |       |       |  |  |      |      |      |     |  |  |      |      |        |     |   |  |      |      |     |    |  |     |      |      |     |     |   |  |      |      |     |     |  |  |      |      |       |     |   |  |      |      |       |     |  |  |      |      |     |     |                  |  |      |      |     |     |  |  |      |      |     |     |                          |  |      |      |       |     |   |  |      |      |     |    |                                     |  |      |      |       |     |                                    |  |      |      |       |     |                                |  |      |      |     |     |                  |  |      |      |     |     |                 |  |      |      |     |    |                               |  |      |      |    |    |   |  |      |      |     |    |   |  |      |       |    |    |  |  |      |      |     |     |   |  |      |      |     |     |  |  |      |      |     |     |   |  |      |      |     |     |   |  |                     |  |  |  |  |  |                                   |  |  |  |                     |         |
| 1061  | 2061         | 130   | 65           | Surcharge - late filing fee or oath  |          |                    |          |      |      |                    |     |                    |  |   |      |              |              |                   |          |                 |          |      |      |                  |   |                        |      |      |      |                    |    |                                   |      |      |      |                        |     |                                       |  |      |      |    |    |   |  |              |              |          |          |   |          |                     |      |     |    |                                     |  |      |      |    |    |  |  |      |      |     |    |                           |  |      |      |       |       |  |  |      |      |      |     |  |  |      |      |        |     |   |  |      |      |     |    |  |     |      |      |     |     |   |  |      |      |     |     |  |  |      |      |       |     |   |  |      |      |       |     |  |  |      |      |     |     |                  |  |      |      |     |     |  |  |      |      |     |     |                          |  |      |      |       |     |   |  |      |      |     |    |                                     |  |      |      |       |     |                                    |  |      |      |       |     |                                |  |      |      |     |     |                  |  |      |      |     |     |                 |  |      |      |     |    |                               |  |      |      |    |    |   |  |      |      |     |    |   |  |      |       |    |    |  |  |      |      |     |     |   |  |      |      |     |     |  |  |      |      |     |     |   |  |      |      |     |     |   |  |                     |  |  |  |  |  |                                   |  |  |  |                     |         |
| 1092  | 2092         | 50  | 25           | Surcharge - late provisional filing fee or cover sheet                     |          |                    |          |      |      |                    |     |                    |  |   |      |              |              |                   |          |                 |          |      |      |                  |   |                        |      |      |      |                    |    |                                   |      |      |      |                        |     |                                       |  |      |      |    |    |   |  |              |              |          |          |   |          |                     |      |     |    |                                     |  |      |      |    |    |  |  |      |      |     |    |                           |  |      |      |       |       |  |  |      |      |      |     |  |  |      |      |        |     |   |  |      |      |     |    |  |     |      |      |     |     |   |  |      |      |     |     |  |  |      |      |       |     |   |  |      |      |       |     |  |  |      |      |     |     |                  |  |      |      |     |     |  |  |      |      |     |     |                          |  |      |      |       |     |   |  |      |      |     |    |                                     |  |      |      |       |     |                                    |  |      |      |       |     |                                |  |      |      |     |     |                  |  |      |      |     |     |                 |  |      |      |     |    |                               |  |      |      |    |    |   |  |      |      |     |    |   |  |      |       |    |    |  |  |      |      |     |     |   |  |      |      |     |     |  |  |      |      |     |     |   |  |      |      |     |     |   |  |                     |  |  |  |  |  |                                   |  |  |  |                     |         |
| 1093  | 2093         | 130   | 65           | Non-English specification  |          |                    |          |      |      |                    |     |                    |  |   |      |              |              |                   |          |                 |          |      |      |                  |   |                        |      |      |      |                    |    |                                   |      |      |      |                        |     |                                       |  |      |      |    |    |   |  |              |              |          |          |   |          |                     |      |     |    |                                     |  |      |      |    |    |  |  |      |      |     |    |                           |  |      |      |       |       |  |  |      |      |      |     |  |  |      |      |        |     |   |  |      |      |     |    |  |     |      |      |     |     |   |  |      |      |     |     |  |  |      |      |       |     |   |  |      |      |       |     |  |  |      |      |     |     |                  |  |      |      |     |     |  |  |      |      |     |     |                          |  |      |      |       |     |   |  |      |      |     |    |                                     |  |      |      |       |     |                                    |  |      |      |       |     |                                |  |      |      |     |     |                  |  |      |      |     |     |                 |  |      |      |     |    |                               |  |      |      |    |    |   |  |      |      |     |    |   |  |      |       |    |    |  |  |      |      |     |     |   |  |      |      |     |     |  |  |      |      |     |     |   |  |      |      |     |     |   |  |                     |  |  |  |  |  |                                   |  |  |  |                     |         |
| 1812  | 2812         | 2,520   | 1,260        | For filing a request for reexamination                                     |          |                    |          |      |      |                    |     |                    |  |   |      |              |              |                   |          |                 |          |      |      |                  |   |                        |      |      |      |                    |    |                                   |      |      |      |                        |     |                                       |  |      |      |    |    |   |  |              |              |          |          |   |          |                     |      |     |    |                                     |  |      |      |    |    |  |  |      |      |     |    |                           |  |      |      |       |       |  |  |      |      |      |     |  |  |      |      |        |     |   |  |      |      |     |    |  |     |      |      |     |     |   |  |      |      |     |     |  |  |      |      |       |     |   |  |      |      |       |     |  |  |      |      |     |     |                  |  |      |      |     |     |  |  |      |      |     |     |                          |  |      |      |       |     |   |  |      |      |     |    |                                     |  |      |      |       |     |                                    |  |      |      |       |     |                                |  |      |      |     |     |                  |  |      |      |     |     |                 |  |      |      |     |    |                               |  |      |      |    |    |   |  |      |      |     |    |   |  |      |       |    |    |  |  |      |      |     |     |   |  |      |      |     |     |  |  |      |      |     |     |   |  |      |      |     |     |   |  |                     |  |  |  |  |  |                                   |  |  |  |                     |         |
| 1804  | 2804         | 920*  | 460          | Requesting publication of SIR prior to Examiner action                     |          |                    |          |      |      |                    |     |                    |  |   |      |              |              |                   |          |                 |          |      |      |                  |   |                        |      |      |      |                    |    |                                   |      |      |      |                        |     |                                       |  |      |      |    |    |   |  |              |              |          |          |   |          |                     |      |     |    |                                     |  |      |      |    |    |  |  |      |      |     |    |                           |  |      |      |       |       |  |  |      |      |      |     |  |  |      |      |        |     |   |  |      |      |     |    |  |     |      |      |     |     |   |  |      |      |     |     |  |  |      |      |       |     |   |  |      |      |       |     |  |  |      |      |     |     |                  |  |      |      |     |     |  |  |      |      |     |     |                          |  |      |      |       |     |   |  |      |      |     |    |                                     |  |      |      |       |     |                                    |  |      |      |       |     |                                |  |      |      |     |     |                  |  |      |      |     |     |                 |  |      |      |     |    |                               |  |      |      |    |    |   |  |      |      |     |    |   |  |      |       |    |    |  |  |      |      |     |     |   |  |      |      |     |     |  |  |      |      |     |     |   |  |      |      |     |     |   |  |                     |  |  |  |  |  |                                   |  |  |  |                     |         |
| 1805  | 2805         | 1,840*  | 920          | Requesting publication of SIR after Examiner action                        |          |                    |          |      |      |                    |     |                    |  |   |      |              |              |                   |          |                 |          |      |      |                  |   |                        |      |      |      |                    |    |                                   |      |      |      |                        |     |                                       |  |      |      |    |    |   |  |              |              |          |          |   |          |                     |      |     |    |                                     |  |      |      |    |    |  |  |      |      |     |    |                           |  |      |      |       |       |  |  |      |      |      |     |  |  |      |      |        |     |   |  |      |      |     |    |  |     |      |      |     |     |   |  |      |      |     |     |  |  |      |      |       |     |   |  |      |      |       |     |  |  |      |      |     |     |                  |  |      |      |     |     |  |  |      |      |     |     |                          |  |      |      |       |     |   |  |      |      |     |    |                                     |  |      |      |       |     |                                    |  |      |      |       |     |                                |  |      |      |     |     |                  |  |      |      |     |     |                 |  |      |      |     |    |                               |  |      |      |    |    |   |  |      |      |     |    |   |  |      |       |    |    |  |  |      |      |     |     |   |  |      |      |     |     |  |  |      |      |     |     |   |  |      |      |     |     |   |  |                     |  |  |  |  |  |                                   |  |  |  |                     |         |
| 1261  | 2261         | 110   | 55           | Extension for reply within first month                                     | 110      |                    |          |      |      |                    |     |                    |  |   |      |              |              |                   |          |                 |          |      |      |                  |   |                        |      |      |      |                    |    |                                   |      |      |      |                        |     |                                       |  |      |      |    |    |   |  |              |              |          |          |   |          |                     |      |     |    |                                     |  |      |      |    |    |  |  |      |      |     |    |                           |  |      |      |       |       |  |  |      |      |      |     |  |  |      |      |        |     |   |  |      |      |     |    |  |     |      |      |     |     |   |  |      |      |     |     |  |  |      |      |       |     |   |  |      |      |       |     |  |  |      |      |     |     |                  |  |      |      |     |     |  |  |      |      |     |     |                          |  |      |      |       |     |   |  |      |      |     |    |                                     |  |      |      |       |     |                                    |  |      |      |       |     |                                |  |      |      |     |     |                  |  |      |      |     |     |                 |  |      |      |     |    |                               |  |      |      |    |    |   |  |      |      |     |    |   |  |      |       |    |    |  |  |      |      |     |     |   |  |      |      |     |     |  |  |      |      |     |     |   |  |      |      |     |     |   |  |                     |  |  |  |  |  |                                   |  |  |  |                     |         |
| 1252  | 2252         | 410   | 205          | Extension for reply within second month                                    |          |                    |          |      |      |                    |     |                    |  |   |      |              |              |                   |          |                 |          |      |      |                  |   |                        |      |      |      |                    |    |                                   |      |      |      |                        |     |                                       |  |      |      |    |    |   |  |              |              |          |          |   |          |                     |      |     |    |                                     |  |      |      |    |    |  |  |      |      |     |    |                           |  |      |      |       |       |  |  |      |      |      |     |  |  |      |      |        |     |   |  |      |      |     |    |  |     |      |      |     |     |   |  |      |      |     |     |  |  |      |      |       |     |   |  |      |      |       |     |  |  |      |      |     |     |                  |  |      |      |     |     |  |  |      |      |     |     |                          |  |      |      |       |     |   |  |      |      |     |    |                                     |  |      |      |       |     |                                    |  |      |      |       |     |                                |  |      |      |     |     |                  |  |      |      |     |     |                 |  |      |      |     |    |                               |  |      |      |    |    |   |  |      |      |     |    |   |  |      |       |    |    |  |  |      |      |     |     |   |  |      |      |     |     |  |  |      |      |     |     |   |  |      |      |     |     |   |  |                     |  |  |  |  |  |                                   |  |  |  |                     |         |
| 1253  | 2253         | 830   | 415          | Extension for reply within third month                                     |          |                    |          |      |      |                    |     |                    |  |   |      |              |              |                   |          |                 |          |      |      |                  |   |                        |      |      |      |                    |    |                                   |      |      |      |                        |     |                                       |  |      |      |    |    |   |  |              |              |          |          |   |          |                     |      |     |    |                                     |  |      |      |    |    |  |  |      |      |     |    |                           |  |      |      |       |       |  |  |      |      |      |     |  |  |      |      |        |     |   |  |      |      |     |    |  |     |      |      |     |     |   |  |      |      |     |     |  |  |      |      |       |     |   |  |      |      |       |     |  |  |      |      |     |     |                  |  |      |      |     |     |  |  |      |      |     |     |                          |  |      |      |       |     |   |  |      |      |     |    |                                     |  |      |      |       |     |                                    |  |      |      |       |     |                                |  |      |      |     |     |                  |  |      |      |     |     |                 |  |      |      |     |    |                               |  |      |      |    |    |   |  |      |      |     |    |   |  |      |       |    |    |  |  |      |      |     |     |   |  |      |      |     |     |  |  |      |      |     |     |   |  |      |      |     |     |   |  |                     |  |  |  |  |  |                                   |  |  |  |                     |         |
| 1254  | 2254         | 1,450   | 725          | Extension for reply within fourth month                                    |          |                    |          |      |      |                    |     |                    |  |   |      |              |              |                   |          |                 |          |      |      |                  |   |                        |      |      |      |                    |    |                                   |      |      |      |                        |     |                                       |  |      |      |    |    |   |  |              |              |          |          |   |          |                     |      |     |    |                                     |  |      |      |    |    |  |  |      |      |     |    |                           |  |      |      |       |       |  |  |      |      |      |     |  |  |      |      |        |     |   |  |      |      |     |    |  |     |      |      |     |     |   |  |      |      |     |     |  |  |      |      |       |     |   |  |      |      |       |     |  |  |      |      |     |     |                  |  |      |      |     |     |  |  |      |      |     |     |                          |  |      |      |       |     |   |  |      |      |     |    |                                     |  |      |      |       |     |                                    |  |      |      |       |     |                                |  |      |      |     |     |                  |  |      |      |     |     |                 |  |      |      |     |    |                               |  |      |      |    |    |   |  |      |      |     |    |   |  |      |       |    |    |  |  |      |      |     |     |   |  |      |      |     |     |  |  |      |      |     |     |   |  |      |      |     |     |   |  |                     |  |  |  |  |  |                                   |  |  |  |                     |         |
| 1255  | 2255         | 1,870   | 935          | Extension for reply within fifth month                                     |          |                    |          |      |      |                    |     |                    |  |   |      |              |              |                   |          |                 |          |      |      |                  |   |                        |      |      |      |                    |    |                                   |      |      |      |                        |     |                                       |  |      |      |    |    |   |  |              |              |          |          |   |          |                     |      |     |    |                                     |  |      |      |    |    |  |  |      |      |     |    |                           |  |      |      |       |       |  |  |      |      |      |     |  |  |      |      |        |     |   |  |      |      |     |    |  |     |      |      |     |     |   |  |      |      |     |     |  |  |      |      |       |     |   |  |      |      |       |     |  |  |      |      |     |     |                  |  |      |      |     |     |  |  |      |      |     |     |                          |  |      |      |       |     |   |  |      |      |     |    |                                     |  |      |      |       |     |                                    |  |      |      |       |     |                                |  |      |      |     |     |                  |  |      |      |     |     |                 |  |      |      |     |    |                               |  |      |      |    |    |   |  |      |      |     |    |   |  |      |       |    |    |  |  |      |      |     |     |   |  |      |      |     |     |  |  |      |      |     |     |   |  |      |      |     |     |   |  |                     |  |  |  |  |  |                                   |  |  |  |                     |         |
| 1401  | 2401         | 320   | 160          | Notice of Appeal   |          |                    |          |      |      |                    |     |                    |  |   |      |              |              |                   |          |                 |          |      |      |                  |   |                        |      |      |      |                    |    |                                   |      |      |      |                        |     |                                       |  |      |      |    |    |   |  |              |              |          |          |   |          |                     |      |     |    |                                     |  |      |      |    |    |  |  |      |      |     |    |                           |  |      |      |       |       |  |  |      |      |      |     |  |  |      |      |        |     |   |  |      |      |     |    |  |     |      |      |     |     |   |  |      |      |     |     |  |  |      |      |       |     |   |  |      |      |       |     |  |  |      |      |     |     |                  |  |      |      |     |     |  |  |      |      |     |     |                          |  |      |      |       |     |   |  |      |      |     |    |                                     |  |      |      |       |     |                                    |  |      |      |       |     |                                |  |      |      |     |     |                  |  |      |      |     |     |                 |  |      |      |     |    |                               |  |      |      |    |    |   |  |      |      |     |    |   |  |      |       |    |    |  |  |      |      |     |     |   |  |      |      |     |     |  |  |      |      |     |     |   |  |      |      |     |     |   |  |                     |  |  |  |  |  |                                   |  |  |  |                     |         |
| 1402  | 2402         | 320   | 160          | Filing a brief in support of an appeal                                     |          |                    |          |      |      |                    |     |                    |  |   |      |              |              |                   |          |                 |          |      |      |                  |   |                        |      |      |      |                    |    |                                   |      |      |      |                        |     |                                       |  |      |      |    |    |   |  |              |              |          |          |   |          |                     |      |     |    |                                     |  |      |      |    |    |  |  |      |      |     |    |                           |  |      |      |       |       |  |  |      |      |      |     |  |  |      |      |        |     |   |  |      |      |     |    |  |     |      |      |     |     |   |  |      |      |     |     |  |  |      |      |       |     |   |  |      |      |       |     |  |  |      |      |     |     |                  |  |      |      |     |     |  |  |      |      |     |     |                          |  |      |      |       |     |   |  |      |      |     |    |                                     |  |      |      |       |     |                                    |  |      |      |       |     |                                |  |      |      |     |     |                  |  |      |      |     |     |                 |  |      |      |     |    |                               |  |      |      |    |    |   |  |      |      |     |    |   |  |      |       |    |    |  |  |      |      |     |     |   |  |      |      |     |     |  |  |      |      |     |     |   |  |      |      |     |     |   |  |                     |  |  |  |  |  |                                   |  |  |  |                     |         |
| 1403  | 2403         | 280   | 140          | Request for oral hearing   |          |                    |          |      |      |                    |     |                    |  |   |      |              |              |                   |          |                 |          |      |      |                  |   |                        |      |      |      |                    |    |                                   |      |      |      |                        |     |                                       |  |      |      |    |    |   |  |              |              |          |          |   |          |                     |      |     |    |                                     |  |      |      |    |    |  |  |      |      |     |    |                           |  |      |      |       |       |  |  |      |      |      |     |  |  |      |      |        |     |   |  |      |      |     |    |  |     |      |      |     |     |   |  |      |      |     |     |  |  |      |      |       |     |   |  |      |      |       |     |  |  |      |      |     |     |                  |  |      |      |     |     |  |  |      |      |     |     |                          |  |      |      |       |     |   |  |      |      |     |    |                                     |  |      |      |       |     |                                    |  |      |      |       |     |                                |  |      |      |     |     |                  |  |      |      |     |     |                 |  |      |      |     |    |                               |  |      |      |    |    |   |  |      |      |     |    |   |  |      |       |    |    |  |  |      |      |     |     |   |  |      |      |     |     |  |  |      |      |     |     |   |  |      |      |     |     |   |  |                     |  |  |  |  |  |                                   |  |  |  |                     |         |
| 1451  | 2451         | 1,510   | 755          | Petition to institute a public use proceeding                              |          |                    |          |      |      |                    |     |                    |  |   |      |              |              |                   |          |                 |          |      |      |                  |   |                        |      |      |      |                    |    |                                   |      |      |      |                        |     |                                       |  |      |      |    |    |   |  |              |              |          |          |   |          |                     |      |     |    |                                     |  |      |      |    |    |  |  |      |      |     |    |                           |  |      |      |       |       |  |  |      |      |      |     |  |  |      |      |        |     |   |  |      |      |     |    |  |     |      |      |     |     |   |  |      |      |     |     |  |  |      |      |       |     |   |  |      |      |       |     |  |  |      |      |     |     |                  |  |      |      |     |     |  |  |      |      |     |     |                          |  |      |      |       |     |   |  |      |      |     |    |                                     |  |      |      |       |     |                                    |  |      |      |       |     |                                |  |      |      |     |     |                  |  |      |      |     |     |                 |  |      |      |     |    |                               |  |      |      |    |    |   |  |      |      |     |    |   |  |      |       |    |    |  |  |      |      |     |     |   |  |      |      |     |     |  |  |      |      |     |     |   |  |      |      |     |     |   |  |                     |  |  |  |  |  |                                   |  |  |  |                     |         |
| 1452  | 2452         | 110   | 55           | Petition to revive - unavailability  |          |                    |          |      |      |                    |     |                    |  |   |      |              |              |                   |          |                 |          |      |      |                  |   |                        |      |      |      |                    |    |                                   |      |      |      |                        |     |                                       |  |      |      |    |    |   |  |              |              |          |          |   |          |                     |      |     |    |                                     |  |      |      |    |    |  |  |      |      |     |    |                           |  |      |      |       |       |  |  |      |      |      |     |  |  |      |      |        |     |   |  |      |      |     |    |  |     |      |      |     |     |   |  |      |      |     |     |  |  |      |      |       |     |   |  |      |      |       |     |  |  |      |      |     |     |                  |  |      |      |     |     |  |  |      |      |     |     |                          |  |      |      |       |     |   |  |      |      |     |    |                                     |  |      |      |       |     |                                    |  |      |      |       |     |                                |  |      |      |     |     |                  |  |      |      |     |     |                 |  |      |      |     |    |                               |  |      |      |    |    |   |  |      |      |     |    |   |  |      |       |    |    |  |  |      |      |     |     |   |  |      |      |     |     |  |  |      |      |     |     |   |  |      |      |     |     |   |  |                     |  |  |  |  |  |                                   |  |  |  |                     |         |
| 1453  | 2453         | 1,300   | 650          | Petition to revive - unintentional   |          |                    |          |      |      |                    |     |                    |  |   |      |              |              |                   |          |                 |          |      |      |                  |   |                        |      |      |      |                    |    |                                   |      |      |      |                        |     |                                       |  |      |      |    |    |   |  |              |              |          |          |   |          |                     |      |     |    |                                     |  |      |      |    |    |  |  |      |      |     |    |                           |  |      |      |       |       |  |  |      |      |      |     |  |  |      |      |        |     |   |  |      |      |     |    |  |     |      |      |     |     |   |  |      |      |     |     |  |  |      |      |       |     |   |  |      |      |       |     |  |  |      |      |     |     |                  |  |      |      |     |     |  |  |      |      |     |     |                          |  |      |      |       |     |   |  |      |      |     |    |                                     |  |      |      |       |     |                                    |  |      |      |       |     |                                |  |      |      |     |     |                  |  |      |      |     |     |                 |  |      |      |     |    |                               |  |      |      |    |    |   |  |      |      |     |    |   |  |      |       |    |    |  |  |      |      |     |     |   |  |      |      |     |     |  |  |      |      |     |     |   |  |      |      |     |     |   |  |                     |  |  |  |  |  |                                   |  |  |  |                     |         |
| 1501  | 2501         | 1,300   | 650          | Utility issue fee (or reissue)   |          |                    |          |      |      |                    |     |                    |  |   |      |              |              |                   |          |                 |          |      |      |                  |   |                        |      |      |      |                    |    |                                   |      |      |      |                        |     |                                       |  |      |      |    |    |   |  |              |              |          |          |   |          |                     |      |     |    |                                     |  |      |      |    |    |  |  |      |      |     |    |                           |  |      |      |       |       |  |  |      |      |      |     |  |  |      |      |        |     |   |  |      |      |     |    |  |     |      |      |     |     |   |  |      |      |     |     |  |  |      |      |       |     |   |  |      |      |       |     |  |  |      |      |     |     |                  |  |      |      |     |     |  |  |      |      |     |     |                          |  |      |      |       |     |   |  |      |      |     |    |                                     |  |      |      |       |     |                                    |  |      |      |       |     |                                |  |      |      |     |     |                  |  |      |      |     |     |                 |  |      |      |     |    |                               |  |      |      |    |    |   |  |      |      |     |    |   |  |      |       |    |    |  |  |      |      |     |     |   |  |      |      |     |     |  |  |      |      |     |     |   |  |      |      |     |     |   |  |                     |  |  |  |  |  |                                   |  |  |  |                     |         |
| 1502  | 2502         | 470   | 235          | Design issue fee   |          |                    |          |      |      |                    |     |                    |  |   |      |              |              |                   |          |                 |          |      |      |                  |   |                        |      |      |      |                    |    |                                   |      |      |      |                        |     |                                       |  |      |      |    |    |   |  |              |              |          |          |   |          |                     |      |     |    |                                     |  |      |      |    |    |  |  |      |      |     |    |                           |  |      |      |       |       |  |  |      |      |      |     |  |  |      |      |        |     |   |  |      |      |     |    |  |     |      |      |     |     |   |  |      |      |     |     |  |  |      |      |       |     |   |  |      |      |       |     |  |  |      |      |     |     |                  |  |      |      |     |     |  |  |      |      |     |     |                          |  |      |      |       |     |   |  |      |      |     |    |                                     |  |      |      |       |     |                                    |  |      |      |       |     |                                |  |      |      |     |     |                  |  |      |      |     |     |                 |  |      |      |     |    |                               |  |      |      |    |    |   |  |      |      |     |    |   |  |      |       |    |    |  |  |      |      |     |     |   |  |      |      |     |     |  |  |      |      |     |     |   |  |      |      |     |     |   |  |                     |  |  |  |  |  |                                   |  |  |  |                     |         |
| 1503  | 2503         | 630   | 315          | Plant issue fee  |          |                    |          |      |      |                    |     |                    |  |   |      |              |              |                   |          |                 |          |      |      |                  |   |                        |      |      |      |                    |    |                                   |      |      |      |                        |     |                                       |  |      |      |    |    |   |  |              |              |          |          |   |          |                     |      |     |    |                                     |  |      |      |    |    |  |  |      |      |     |    |                           |  |      |      |       |       |  |  |      |      |      |     |  |  |      |      |        |     |   |  |      |      |     |    |  |     |      |      |     |     |   |  |      |      |     |     |  |  |      |      |       |     |   |  |      |      |       |     |  |  |      |      |     |     |                  |  |      |      |     |     |  |  |      |      |     |     |                          |  |      |      |       |     |   |  |      |      |     |    |                                     |  |      |      |       |     |                                    |  |      |      |       |     |                                |  |      |      |     |     |                  |  |      |      |     |     |                 |  |      |      |     |    |                               |  |      |      |    |    |   |  |      |      |     |    |   |  |      |       |    |    |  |  |      |      |     |     |   |  |      |      |     |     |  |  |      |      |     |     |   |  |      |      |     |     |   |  |                     |  |  |  |  |  |                                   |  |  |  |                     |         |
| 1480  | 2480         | 130   | 65           | Petitions to the Commissioner  |          |                    |          |      |      |                    |     |                    |  |   |      |              |              |                   |          |                 |          |      |      |                  |   |                        |      |      |      |                    |    |                                   |      |      |      |                        |     |                                       |  |      |      |    |    |   |  |              |              |          |          |   |          |                     |      |     |    |                                     |  |      |      |    |    |  |  |      |      |     |    |                           |  |      |      |       |       |  |  |      |      |      |     |  |  |      |      |        |     |   |  |      |      |     |    |  |     |      |      |     |     |   |  |      |      |     |     |  |  |      |      |       |     |   |  |      |      |       |     |  |  |      |      |     |     |                  |  |      |      |     |     |  |  |      |      |     |     |                          |  |      |      |       |     |   |  |      |      |     |    |                                     |  |      |      |       |     |                                    |  |      |      |       |     |                                |  |      |      |     |     |                  |  |      |      |     |     |                 |  |      |      |     |    |                               |  |      |      |    |    |   |  |      |      |     |    |   |  |      |       |    |    |  |  |      |      |     |     |   |  |      |      |     |     |  |  |      |      |     |     |   |  |      |      |     |     |   |  |                     |  |  |  |  |  |                                   |  |  |  |                     |         |
| 1807  | 2807         | 50  | 25           | Petitions related to provisional applications                              |          |                    |          |      |      |                    |     |                    |  |   |      |              |              |                   |          |                 |          |      |      |                  |   |                        |      |      |      |                    |    |                                   |      |      |      |                        |     |                                       |  |      |      |    |    |   |  |              |              |          |          |   |          |                     |      |     |    |                                     |  |      |      |    |    |  |  |      |      |     |    |                           |  |      |      |       |       |  |  |      |      |      |     |  |  |      |      |        |     |   |  |      |      |     |    |  |     |      |      |     |     |   |  |      |      |     |     |  |  |      |      |       |     |   |  |      |      |       |     |  |  |      |      |     |     |                  |  |      |      |     |     |  |  |      |      |     |     |                          |  |      |      |       |     |   |  |      |      |     |    |                                     |  |      |      |       |     |                                    |  |      |      |       |     |                                |  |      |      |     |     |                  |  |      |      |     |     |                 |  |      |      |     |    |                               |  |      |      |    |    |   |  |      |      |     |    |   |  |      |       |    |    |  |  |      |      |     |     |   |  |      |      |     |     |  |  |      |      |     |     |   |  |      |      |     |     |   |  |                     |  |  |  |  |  |                                   |  |  |  |                     |         |
| 1808  | 2808         | 180   | 90           | Submission of Information Disclosure Stmt                                  |          |                    |          |      |      |                    |     |                    |  |   |      |              |              |                   |          |                 |          |      |      |                  |   |                        |      |      |      |                    |    |                                   |      |      |      |                        |     |                                       |  |      |      |    |    |   |  |              |              |          |          |   |          |                     |      |     |    |                                     |  |      |      |    |    |  |  |      |      |     |    |                           |  |      |      |       |       |  |  |      |      |      |     |  |  |      |      |        |     |   |  |      |      |     |    |  |     |      |      |     |     |   |  |      |      |     |     |  |  |      |      |       |     |   |  |      |      |       |     |  |  |      |      |     |     |                  |  |      |      |     |     |  |  |      |      |     |     |                          |  |      |      |       |     |   |  |      |      |     |    |                                     |  |      |      |       |     |                                    |  |      |      |       |     |                                |  |      |      |     |     |                  |  |      |      |     |     |                 |  |      |      |     |    |                               |  |      |      |    |    |   |  |      |      |     |    |   |  |      |       |    |    |  |  |      |      |     |     |   |  |      |      |     |     |  |  |      |      |     |     |   |  |      |      |     |     |   |  |                     |  |  |  |  |  |                                   |  |  |  |                     |         |
| 8021  | 28021        | 40  | 20           | Recording each patent assignment per property (times number of properties) |          |                    |          |      |      |                    |     |                    |  |   |      |              |              |                   |          |                 |          |      |      |                  |   |                        |      |      |      |                    |    |                                   |      |      |      |                        |     |                                       |  |      |      |    |    |   |  |              |              |          |          |   |          |                     |      |     |    |                                     |  |      |      |    |    |  |  |      |      |     |    |                           |  |      |      |       |       |  |  |      |      |      |     |  |  |      |      |        |     |   |  |      |      |     |    |  |     |      |      |     |     |   |  |      |      |     |     |  |  |      |      |       |     |   |  |      |      |       |     |  |  |      |      |     |     |                  |  |      |      |     |     |  |  |      |      |     |     |                          |  |      |      |       |     |   |  |      |      |     |    |                                     |  |      |      |       |     |                                    |  |      |      |       |     |                                |  |      |      |     |     |                  |  |      |      |     |     |                 |  |      |      |     |    |                               |  |      |      |    |    |   |  |      |      |     |    |   |  |      |       |    |    |  |  |      |      |     |     |   |  |      |      |     |     |  |  |      |      |     |     |   |  |      |      |     |     |   |  |                     |  |  |  |  |  |                                   |  |  |  |                     |         |
| 1809  | 2809         | 750   | 375          | Filing a submission after final rejection (37 CFR § 1.129(a))              |          |                    |          |      |      |                    |     |                    |  |   |      |              |              |                   |          |                 |          |      |      |                  |   |                        |      |      |      |                    |    |                                   |      |      |      |                        |     |                                       |  |      |      |    |    |   |  |              |              |          |          |   |          |                     |      |     |    |                                     |  |      |      |    |    |  |  |      |      |     |    |                           |  |      |      |       |       |  |  |      |      |      |     |  |  |      |      |        |     |   |  |      |      |     |    |  |     |      |      |     |     |   |  |      |      |     |     |  |  |      |      |       |     |   |  |      |      |       |     |  |  |      |      |     |     |                  |  |      |      |     |     |  |  |      |      |     |     |                          |  |      |      |       |     |   |  |      |      |     |    |                                     |  |      |      |       |     |                                    |  |      |      |       |     |                                |  |      |      |     |     |                  |  |      |      |     |     |                 |  |      |      |     |    |                               |  |      |      |    |    |   |  |      |      |     |    |   |  |      |       |    |    |  |  |      |      |     |     |   |  |      |      |     |     |  |  |      |      |     |     |   |  |      |      |     |     |   |  |                     |  |  |  |  |  |                                   |  |  |  |                     |         |
| 1810  | 2810         | 750   | 375          | For each additional invention to be examined (37 CFR § 1.129(b))           |          |                    |          |      |      |                    |     |                    |  |   |      |              |              |                   |          |                 |          |      |      |                  |   |                        |      |      |      |                    |    |                                   |      |      |      |                        |     |                                       |  |      |      |    |    |   |  |              |              |          |          |   |          |                     |      |     |    |                                     |  |      |      |    |    |  |  |      |      |     |    |                           |  |      |      |       |       |  |  |      |      |      |     |  |  |      |      |        |     |   |  |      |      |     |    |  |     |      |      |     |     |   |  |      |      |     |     |  |  |      |      |       |     |   |  |      |      |       |     |  |  |      |      |     |     |                  |  |      |      |     |     |  |  |      |      |     |     |                          |  |      |      |       |     |   |  |      |      |     |    |                                     |  |      |      |       |     |                                    |  |      |      |       |     |                                |  |      |      |     |     |                  |  |      |      |     |     |                 |  |      |      |     |    |                               |  |      |      |    |    |   |  |      |      |     |    |   |  |      |       |    |    |  |  |      |      |     |     |   |  |      |      |     |     |  |  |      |      |     |     |   |  |      |      |     |     |   |  |                     |  |  |  |  |  |                                   |  |  |  |                     |         |
| 1801  | 2801         | 750   | 375          | Request for Continued Examination (RCE)                                    |          |                    |          |      |      |                    |     |                    |  |   |      |              |              |                   |          |                 |          |      |      |                  |   |                        |      |      |      |                    |    |                                   |      |      |      |                        |     |                                       |  |      |      |    |    |   |  |              |              |          |          |   |          |                     |      |     |    |                                     |  |      |      |    |    |  |  |      |      |     |    |                           |  |      |      |       |       |  |  |      |      |      |     |  |  |      |      |        |     |   |  |      |      |     |    |  |     |      |      |     |     |   |  |      |      |     |     |  |  |      |      |       |     |   |  |      |      |       |     |  |  |      |      |     |     |                  |  |      |      |     |     |  |  |      |      |     |     |                          |  |      |      |       |     |   |  |      |      |     |    |                                     |  |      |      |       |     |                                    |  |      |      |       |     |                                |  |      |      |     |     |                  |  |      |      |     |     |                 |  |      |      |     |    |                               |  |      |      |    |    |   |  |      |      |     |    |   |  |      |       |    |    |  |  |      |      |     |     |   |  |      |      |     |     |  |  |      |      |     |     |   |  |      |      |     |     |   |  |                     |  |  |  |  |  |                                   |  |  |  |                     |         |
| 1802  | 2802         | 900   | 450          | Request for expedited examination of a design application                  |          |                    |          |      |      |                    |     |                    |  |   |      |              |              |                   |          |                 |          |      |      |                  |   |                        |      |      |      |                    |    |                                   |      |      |      |                        |     |                                       |  |      |      |    |    |   |  |              |              |          |          |   |          |                     |      |     |    |                                     |  |      |      |    |    |  |  |      |      |     |    |                           |  |      |      |       |       |  |  |      |      |      |     |  |  |      |      |        |     |   |  |      |      |     |    |  |     |      |      |     |     |   |  |      |      |     |     |  |  |      |      |       |     |   |  |      |      |       |     |  |  |      |      |     |     |                  |  |      |      |     |     |  |  |      |      |     |     |                          |  |      |      |       |     |   |  |      |      |     |    |                                     |  |      |      |       |     |                                    |  |      |      |       |     |                                |  |      |      |     |     |                  |  |      |      |     |     |                 |  |      |      |     |    |                               |  |      |      |    |    |   |  |      |      |     |    |   |  |      |       |    |    |  |  |      |      |     |     |   |  |      |      |     |     |  |  |      |      |     |     |   |  |      |      |     |     |   |  |                     |  |  |  |  |  |                                   |  |  |  |                     |         |
| Other fee (specify)   |              |   |              |  |          |                    |          |      |      |                    |     |                    |  |   |      |              |              |                   |          |                 |          |      |      |                  |   |                        |      |      |      |                    |    |                                   |      |      |      |                        |     |                                       |  |      |      |    |    |   |  |              |              |          |          |   |          |                     |      |     |    |                                     |  |      |      |    |    |  |  |      |      |     |    |                           |  |      |      |       |       |  |  |      |      |      |     |  |  |      |      |        |     |   |  |      |      |     |    |  |     |      |      |     |     |   |  |      |      |     |     |  |  |      |      |       |     |   |  |      |      |       |     |  |  |      |      |     |     |                  |  |      |      |     |     |  |  |      |      |     |     |                          |  |      |      |       |     |   |  |      |      |     |    |                                     |  |      |      |       |     |                                    |  |      |      |       |     |                                |  |      |      |     |     |                  |  |      |      |     |     |                 |  |      |      |     |    |                               |  |      |      |    |    |   |  |      |      |     |    |   |  |      |       |    |    |  |  |      |      |     |     |   |  |      |      |     |     |  |  |      |      |     |     |   |  |      |      |     |     |   |  |                     |  |  |  |  |  |                                   |  |  |  |                     |         |
| *Reduced by Basic Filing Fee Paid   |              |   |              | <b>SUBTOTAL (3)</b>  | (\$110)  |                    |          |      |      |                    |     |                    |  |   |      |              |              |                   |          |                 |          |      |      |                  |   |                        |      |      |      |                    |    |                                   |      |      |      |                        |     |                                       |  |      |      |    |    |   |  |              |              |          |          |   |          |                     |      |     |    |                                     |  |      |      |    |    |  |  |      |      |     |    |                           |  |      |      |       |       |  |  |      |      |      |     |  |  |      |      |        |     |   |  |      |      |     |    |  |     |      |      |     |     |   |  |      |      |     |     |  |  |      |      |       |     |   |  |      |      |       |     |  |  |      |      |     |     |                  |  |      |      |     |     |  |  |      |      |     |     |                          |  |      |      |       |     |   |  |      |      |     |    |                                     |  |      |      |       |     |                                    |  |      |      |       |     |                                |  |      |      |     |     |                  |  |      |      |     |     |                 |  |      |      |     |    |                               |  |      |      |    |    |   |  |      |      |     |    |   |  |      |       |    |    |  |  |      |      |     |     |   |  |      |      |     |     |  |  |      |      |     |     |   |  |      |      |     |     |   |  |                     |  |  |  |  |  |                                   |  |  |  |                     |         |
| <b>2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE</b><br><table border="1"> <thead> <tr> <th>Total Claims</th> <th>Extra Claims</th> <th>Fees from below</th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr> <td>Independent Claims</td> <td></td> <td></td> <td></td> </tr> <tr> <td>Multiple Dependent</td> <td></td> <td></td> <td></td> </tr> </tbody> </table>   |              | Total Claims  | Extra Claims | Fees from below  | Fee Paid | Independent Claims |          |      |      | Multiple Dependent |     |                    |  | <table border="1"> <thead> <tr> <th>Large Entity</th> <th>Small Entity</th> <th>Fee Code</th> <th>Fee (\$)</th> <th>Fee Description</th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr> <td>1202</td> <td>2202</td> <td>18</td> <td>9</td> <td>Claims in excess of 20</td> <td></td> </tr> <tr> <td>1201</td> <td>2201</td> <td>84</td> <td>42</td> <td>Independent claims in excess of 3</td> <td></td> </tr> <tr> <td>1203</td> <td>2203</td> <td>280</td> <td>140</td> <td>Multiple dependent claim, if not paid</td> <td></td> </tr> <tr> <td>1204</td> <td>2204</td> <td>84</td> <td>42</td> <td>Reissue independent claims over original patent</td> <td></td> </tr> <tr> <td>1205</td> <td>2205</td> <td>18</td> <td>9</td> <td>Reissue claims in excess of 20 and over original patent</td> <td></td> </tr> <tr> <td colspan="4" style="text-align: right;"><b>SUBTOTAL (2)</b></td> <td></td> <td></td> </tr> </tbody> </table> |      | Large Entity | Small Entity | Fee Code          | Fee (\$) | Fee Description | Fee Paid | 1202 | 2202 | 18               | 9 | Claims in excess of 20 |      | 1201 | 2201 | 84                 | 42 | Independent claims in excess of 3 |      | 1203 | 2203 | 280                    | 140 | Multiple dependent claim, if not paid |  | 1204 | 2204 | 84 | 42 | Reissue independent claims over original patent   |  | 1205         | 2205         | 18       | 9        | Reissue claims in excess of 20 and over original patent |          | <b>SUBTOTAL (2)</b> |      |     |    |                                     |  |      |      |    |    |  |  |      |      |     |    |                           |  |      |      |       |       |  |  |      |      |      |     |  |  |      |      |        |     |   |  |      |      |     |    |  |     |      |      |     |     |   |  |      |      |     |     |  |  |      |      |       |     |   |  |      |      |       |     |  |  |      |      |     |     |                  |  |      |      |     |     |  |  |      |      |     |     |                          |  |      |      |       |     |   |  |      |      |     |    |                                     |  |      |      |       |     |                                    |  |      |      |       |     |                                |  |      |      |     |     |                  |  |      |      |     |     |                 |  |      |      |     |    |                               |  |      |      |    |    |   |  |      |      |     |    |   |  |      |       |    |    |  |  |      |      |     |     |   |  |      |      |     |     |  |  |      |      |     |     |   |  |      |      |     |     |   |  |                     |  |  |  |  |  |                                   |  |  |  |                     |         |
| Total Claims  | Extra Claims | Fees from below   | Fee Paid     |  |          |                    |          |      |      |                    |     |                    |  |   |      |              |              |                   |          |                 |          |      |      |                  |   |                        |      |      |      |                    |    |                                   |      |      |      |                        |     |                                       |  |      |      |    |    |   |  |              |              |          |          |   |          |                     |      |     |    |                                     |  |      |      |    |    |  |  |      |      |     |    |                           |  |      |      |       |       |  |  |      |      |      |     |  |  |      |      |        |     |   |  |      |      |     |    |  |     |      |      |     |     |   |  |      |      |     |     |  |  |      |      |       |     |   |  |      |      |       |     |  |  |      |      |     |     |                  |  |      |      |     |     |  |  |      |      |     |     |                          |  |      |      |       |     |   |  |      |      |     |    |                                     |  |      |      |       |     |                                    |  |      |      |       |     |                                |  |      |      |     |     |                  |  |      |      |     |     |                 |  |      |      |     |    |                               |  |      |      |    |    |   |  |      |      |     |    |   |  |      |       |    |    |  |  |      |      |     |     |   |  |      |      |     |     |  |  |      |      |     |     |   |  |      |      |     |     |   |  |                     |  |  |  |  |  |                                   |  |  |  |                     |         |
| Independent Claims  |              |   |              |  |          |                    |          |      |      |                    |     |                    |  |   |      |              |              |                   |          |                 |          |      |      |                  |   |                        |      |      |      |                    |    |                                   |      |      |      |                        |     |                                       |  |      |      |    |    |   |  |              |              |          |          |   |          |                     |      |     |    |                                     |  |      |      |    |    |  |  |      |      |     |    |                           |  |      |      |       |       |  |  |      |      |      |     |  |  |      |      |        |     |   |  |      |      |     |    |  |     |      |      |     |     |   |  |      |      |     |     |  |  |      |      |       |     |   |  |      |      |       |     |  |  |      |      |     |     |                  |  |      |      |     |     |  |  |      |      |     |     |                          |  |      |      |       |     |   |  |      |      |     |    |                                     |  |      |      |       |     |                                    |  |      |      |       |     |                                |  |      |      |     |     |                  |  |      |      |     |     |                 |  |      |      |     |    |                               |  |      |      |    |    |   |  |      |      |     |    |   |  |      |       |    |    |  |  |      |      |     |     |   |  |      |      |     |     |  |  |      |      |     |     |   |  |      |      |     |     |   |  |                     |  |  |  |  |  |                                   |  |  |  |                     |         |
| Multiple Dependent  |              |   |              |  |          |                    |          |      |      |                    |     |                    |  |   |      |              |              |                   |          |                 |          |      |      |                  |   |                        |      |      |      |                    |    |                                   |      |      |      |                        |     |                                       |  |      |      |    |    |   |  |              |              |          |          |   |          |                     |      |     |    |                                     |  |      |      |    |    |  |  |      |      |     |    |                           |  |      |      |       |       |  |  |      |      |      |     |  |  |      |      |        |     |   |  |      |      |     |    |  |     |      |      |     |     |   |  |      |      |     |     |  |  |      |      |       |     |   |  |      |      |       |     |  |  |      |      |     |     |                  |  |      |      |     |     |  |  |      |      |     |     |                          |  |      |      |       |     |   |  |      |      |     |    |                                     |  |      |      |       |     |                                    |  |      |      |       |     |                                |  |      |      |     |     |                  |  |      |      |     |     |                 |  |      |      |     |    |                               |  |      |      |    |    |   |  |      |      |     |    |   |  |      |       |    |    |  |  |      |      |     |     |   |  |      |      |     |     |  |  |      |      |     |     |   |  |      |      |     |     |   |  |                     |  |  |  |  |  |                                   |  |  |  |                     |         |
| Large Entity  | Small Entity | Fee Code  | Fee (\$)     | Fee Description  | Fee Paid |                    |          |      |      |                    |     |                    |  |   |      |              |              |                   |          |                 |          |      |      |                  |   |                        |      |      |      |                    |    |                                   |      |      |      |                        |     |                                       |  |      |      |    |    |   |  |              |              |          |          |   |          |                     |      |     |    |                                     |  |      |      |    |    |  |  |      |      |     |    |                           |  |      |      |       |       |  |  |      |      |      |     |  |  |      |      |        |     |   |  |      |      |     |    |  |     |      |      |     |     |   |  |      |      |     |     |  |  |      |      |       |     |   |  |      |      |       |     |  |  |      |      |     |     |                  |  |      |      |     |     |  |  |      |      |     |     |                          |  |      |      |       |     |   |  |      |      |     |    |                                     |  |      |      |       |     |                                    |  |      |      |       |     |                                |  |      |      |     |     |                  |  |      |      |     |     |                 |  |      |      |     |    |                               |  |      |      |    |    |   |  |      |      |     |    |   |  |      |       |    |    |  |  |      |      |     |     |   |  |      |      |     |     |  |  |      |      |     |     |   |  |      |      |     |     |   |  |                     |  |  |  |  |  |                                   |  |  |  |                     |         |
| 1202  | 2202         | 18  | 9            | Claims in excess of 20   |          |                    |          |      |      |                    |     |                    |  |   |      |              |              |                   |          |                 |          |      |      |                  |   |                        |      |      |      |                    |    |                                   |      |      |      |                        |     |                                       |  |      |      |    |    |   |  |              |              |          |          |   |          |                     |      |     |    |                                     |  |      |      |    |    |  |  |      |      |     |    |                           |  |      |      |       |       |  |  |      |      |      |     |  |  |      |      |        |     |   |  |      |      |     |    |  |     |      |      |     |     |   |  |      |      |     |     |  |  |      |      |       |     |   |  |      |      |       |     |  |  |      |      |     |     |                  |  |      |      |     |     |  |  |      |      |     |     |                          |  |      |      |       |     |   |  |      |      |     |    |                                     |  |      |      |       |     |                                    |  |      |      |       |     |                                |  |      |      |     |     |                  |  |      |      |     |     |                 |  |      |      |     |    |                               |  |      |      |    |    |   |  |      |      |     |    |   |  |      |       |    |    |  |  |      |      |     |     |   |  |      |      |     |     |  |  |      |      |     |     |   |  |      |      |     |     |   |  |                     |  |  |  |  |  |                                   |  |  |  |                     |         |
| 1201  | 2201         | 84  | 42           | Independent claims in excess of 3  |          |                    |          |      |      |                    |     |                    |  |   |      |              |              |                   |          |                 |          |      |      |                  |   |                        |      |      |      |                    |    |                                   |      |      |      |                        |     |                                       |  |      |      |    |    |   |  |              |              |          |          |   |          |                     |      |     |    |                                     |  |      |      |    |    |  |  |      |      |     |    |                           |  |      |      |       |       |  |  |      |      |      |     |  |  |      |      |        |     |   |  |      |      |     |    |  |     |      |      |     |     |   |  |      |      |     |     |  |  |      |      |       |     |   |  |      |      |       |     |  |  |      |      |     |     |                  |  |      |      |     |     |  |  |      |      |     |     |                          |  |      |      |       |     |   |  |      |      |     |    |                                     |  |      |      |       |     |                                    |  |      |      |       |     |                                |  |      |      |     |     |                  |  |      |      |     |     |                 |  |      |      |     |    |                               |  |      |      |    |    |   |  |      |      |     |    |   |  |      |       |    |    |  |  |      |      |     |     |   |  |      |      |     |     |  |  |      |      |     |     |   |  |      |      |     |     |   |  |                     |  |  |  |  |  |                                   |  |  |  |                     |         |
| 1203  | 2203         | 280   | 140          | Multiple dependent claim, if not paid                                      |          |                    |          |      |      |                    |     |                    |  |   |      |              |              |                   |          |                 |          |      |      |                  |   |                        |      |      |      |                    |    |                                   |      |      |      |                        |     |                                       |  |      |      |    |    |   |  |              |              |          |          |   |          |                     |      |     |    |                                     |  |      |      |    |    |  |  |      |      |     |    |                           |  |      |      |       |       |  |  |      |      |      |     |  |  |      |      |        |     |   |  |      |      |     |    |  |     |      |      |     |     |   |  |      |      |     |     |  |  |      |      |       |     |   |  |      |      |       |     |  |  |      |      |     |     |                  |  |      |      |     |     |  |  |      |      |     |     |                          |  |      |      |       |     |   |  |      |      |     |    |                                     |  |      |      |       |     |                                    |  |      |      |       |     |                                |  |      |      |     |     |                  |  |      |      |     |     |                 |  |      |      |     |    |                               |  |      |      |    |    |   |  |      |      |     |    |   |  |      |       |    |    |  |  |      |      |     |     |   |  |      |      |     |     |  |  |      |      |     |     |   |  |      |      |     |     |   |  |                     |  |  |  |  |  |                                   |  |  |  |                     |         |
| 1204  | 2204         | 84  | 42           | Reissue independent claims over original patent                            |          |                    |          |      |      |                    |     |                    |  |   |      |              |              |                   |          |                 |          |      |      |                  |   |                        |      |      |      |                    |    |                                   |      |      |      |                        |     |                                       |  |      |      |    |    |   |  |              |              |          |          |   |          |                     |      |     |    |                                     |  |      |      |    |    |  |  |      |      |     |    |                           |  |      |      |       |       |  |  |      |      |      |     |  |  |      |      |        |     |   |  |      |      |     |    |  |     |      |      |     |     |   |  |      |      |     |     |  |  |      |      |       |     |   |  |      |      |       |     |  |  |      |      |     |     |                  |  |      |      |     |     |  |  |      |      |     |     |                          |  |      |      |       |     |   |  |      |      |     |    |                                     |  |      |      |       |     |                                    |  |      |      |       |     |                                |  |      |      |     |     |                  |  |      |      |     |     |                 |  |      |      |     |    |                               |  |      |      |    |    |   |  |      |      |     |    |   |  |      |       |    |    |  |  |      |      |     |     |   |  |      |      |     |     |  |  |      |      |     |     |   |  |      |      |     |     |   |  |                     |  |  |  |  |  |                                   |  |  |  |                     |         |
| 1205  | 2205         | 18  | 9            | Reissue claims in excess of 20 and over original patent                    |          |                    |          |      |      |                    |     |                    |  |   |      |              |              |                   |          |                 |          |      |      |                  |   |                        |      |      |      |                    |    |                                   |      |      |      |                        |     |                                       |  |      |      |    |    |   |  |              |              |          |          |   |          |                     |      |     |    |                                     |  |      |      |    |    |  |  |      |      |     |    |                           |  |      |      |       |       |  |  |      |      |      |     |  |  |      |      |        |     |   |  |      |      |     |    |  |     |      |      |     |     |   |  |      |      |     |     |  |  |      |      |       |     |   |  |      |      |       |     |  |  |      |      |     |     |                  |  |      |      |     |     |  |  |      |      |     |     |                          |  |      |      |       |     |   |  |      |      |     |    |                                     |  |      |      |       |     |                                    |  |      |      |       |     |                                |  |      |      |     |     |                  |  |      |      |     |     |                 |  |      |      |     |    |                               |  |      |      |    |    |   |  |      |      |     |    |   |  |      |       |    |    |  |  |      |      |     |     |   |  |      |      |     |     |  |  |      |      |     |     |   |  |      |      |     |     |   |  |                     |  |  |  |  |  |                                   |  |  |  |                     |         |
| <b>SUBTOTAL (2)</b>   |              |   |              |  |          |                    |          |      |      |                    |     |                    |  |   |      |              |              |                   |          |                 |          |      |      |                  |   |                        |      |      |      |                    |    |                                   |      |      |      |                        |     |                                       |  |      |      |    |    |   |  |              |              |          |          |   |          |                     |      |     |    |                                     |  |      |      |    |    |  |  |      |      |     |    |                           |  |      |      |       |       |  |  |      |      |      |     |  |  |      |      |        |     |   |  |      |      |     |    |  |     |      |      |     |     |   |  |      |      |     |     |  |  |      |      |       |     |   |  |      |      |       |     |  |  |      |      |     |     |                  |  |      |      |     |     |  |  |      |      |     |     |                          |  |      |      |       |     |   |  |      |      |     |    |                                     |  |      |      |       |     |                                    |  |      |      |       |     |                                |  |      |      |     |     |                  |  |      |      |     |     |                 |  |      |      |     |    |                               |  |      |      |    |    |   |  |      |      |     |    |   |  |      |       |    |    |  |  |      |      |     |     |   |  |      |      |     |     |  |  |      |      |     |     |   |  |      |      |     |     |   |  |                     |  |  |  |  |  |                                   |  |  |  |                     |         |

|                     |                           |                                   |                  |
|---------------------|---------------------------|-----------------------------------|------------------|
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